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Navy & Marine Corps Medical News
MEDNEWS #98-04
January 29, 1998

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New queuing systems speeds prescription process
From the National Naval Medical Center Pharmacy Department

BETHESDA, Md.--Customers getting prescriptions at the National Naval Medical Center (NNMC) pharmacy will soon be pleasantly surprised by a new queuing system. Beginning the first week of March, the NNMC pharmacy will introduce the Q-MATIC queuing system. Q-MATIC will increase efficiency, streamline your wait, ease congestion in the lobby area, and provide more personal service.

Customers picking up prescriptions will be asked to press one of two buttons on the Q-MATIC computer system box: "active duty in uniform/handicapped" or "all others." The box then issues a numbered ticket. Customers take their seats and wait until their numbers are displayed on an overhead marquee, which will direct them to a numbered window. Active duty and/or handicapped numbers will display at a faster rate than other numbers.

At the window, a team consisting of a pharmacist and a technician will assist the customer according to the individual's needs. The team may call the physician to clarify medications or

to recommend changes in medication, if the medicine is not in stock. Customers will leave the window with their medications and instructions for taking it properly.

Significant new changes at the pharmacy include:

- All patients must take a ticket.
- The paper prescription drop window will no longer exist.

Instead, all pharmacy services will be rendered at a number of windows.

- Customers not responding when their number is displayed will lose their places in line and will need to obtain another ticket upon their return to the pharmacy area.

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Headline: Engineers honored for adapting undersea technology to medical use

From NUWC public affairs

NEWPORT, R.I.-- Two research engineers from Naval Undersea Warfare Center (NUWC) in Newport, R.I. are being honored for their work using sound sensors to diagnose heart disease.

Norman L. Owsley and Andrew J. Hull, both of the NUWC submarine sonar department, have been selected as the 1997 winners of the Federal Laboratory Consortium Award for excellence in technology transfer.

The two engineers adapted the Navy's passive submarine sonar to detect and analyze sounds from the human heart through several inches of tissue. By placing the sensors on an individual's chest, the researchers were able to detect blockages in vessels, such as coronary arteries. This high-tech "stethoscope" will also create a two- or three-dimensional graphic of the heart to further help with diagnoses.

It performs much of the same functions as an angiogram, without invading the human body with needles, probes or scalpels. It could be used in a doctor's office, and it will cost a fraction of other diagnostic procedures.

Owsley and Hull are refining their sonar-stethoscope with their private industry project partners. They expect clinical trials for its use are still at least three years away.

The Federal Laboratory Consortium Award recognizes federal employees who have excelled in transferring technology developed in the laboratory to the private sector.

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Hospital Corpsman aids accident victim

By JO1 Joe Parker

SAN DIEGO -- It's not every day you get to save someone's life - especially with a diaper.

What began as a quiet Saturday morning for Hospital Corpsman Third Class (HM3) Stephanie Vannice, soon became a race to save a bleeding man's life.

Vannice, who works at the Naval Medical Center San Diego, was

about to be confronted by a driver's nightmare. She was driving with her 22-month-old daughter, Taylor. At about 9 a.m., Vannice saw cars stopped in the middle of the road, and there was blood in the street. One man lay on the ground while another man cradled the victim's head.

"When I came across the accident there were a few people standing around the gentleman on the ground," she said. Noticing that the man's head was bleeding profusely, Vannice asked if she could help.

"I remembered from corpsmen training, that the bleeding needed to be stopped," she said.

In her car, Vannice, like all moms with young children, carried extra diapers. They would have to do until more help arrived.

She applied pressure to the head wound. The make-shift bandage worked, and the bleeding stopped.

Within minutes, an ambulance was on the scene. Vannice then stepped back and let other medical professionals take over.

Vannice did not panic when her assistance was needed. She said her Navy training gave her confidence to face the ordeal.

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USNS MERCY assists San Diego during flu emergency
By JO1 Joe Parker, Naval Medical Center San Diego

SAN DIEGO, Calif. The Navy's Bureau of Medicine and Surgery (BUMED) motto "Standing By...Ready to Assist" rang true in San Diego, Calif., during the worst part of the nation's recent flu epidemic.

San Diego's hospital emergency rooms were filled to capacity, which caused a shortage of breathing ventilators. The ventilators provide assistance to people who are unable to breathe on their own.

That's when USNS MERCY (T-AH 19) personnel came to the rescue, offering 25 ship ventilators to local hospitals in need.

Assistance from the Navy came after the Healthcare Association of San Diego and Imperial Counties issued a flu emergency to local hospitals and asked the Navy to help. The ship's medical team coordinated with the Naval Medical Center San Diego to deliver the ventilators.

"We feel that we're good neighbors," said CAPT Bill Roberts, MERCY commanding officer. "We recognized the need in the county and we responded."

He also stressed that making the ventilators available to civilian hospitals did not compromise the MERCY's ability to meet any and all operational commitments. The Medical Center worked closely with the BUMED, to ensure that the maximum amount of support could be given to the San Diego community.

The Navy hospital was also authorized to treat any CHAMPUS eligible beneficiaries who were unable to receive treatment at civilian hospitals.

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Family practice residency training produces quality graduates at
Naval Hospital Pensacola

By Rod Duren, Naval Hospital Pensacola

NH PENSACOLA, FL -- Naval Hospital (NH) Pensacola's unique and well-rounded Family Practice Residency Training Program continues to produce quality graduates, according to both the instructors and residents going through the 3-year curriculum.

There's reason to believe: the recent American Board of Family Physicians (ABFP) certification examination results showed graduating third-year residents scored an average composite score of 560 -- with 6 of 7 residents scoring well above the national average of 500. A perfect score is 800.

"The key to this training is to be able to send these doctors to operational or overseas duty stations and have them be able to jump right in," said CAPT Don Mason, former director of the Family Practice Residency Training Program. "That's a standard of all four (family practice residency) programs...we share ideas and train to the same goals."

The program also received its 5-year accreditation from the Residency Review Committee of the Accreditation Council for Graduate Medical Education. "That and having our residents score in the 75th percentile on their exams is pretty good," said Mason, who was honored as the Family Practice Teacher of the Year for the last two years.

Since the Family Practice Residency Training Program began in 1974, a total of 98 percent of the residents (162), have passed their national boards on the first attempt.

"As a matter of fact, we've never had any class score below average on their certification boards," said Mason.

According to third-year resident, LT Heidi Kulberg: "The program's scope of practice places emphasis on being a well-rounded doctor." The Bisbee, AZ, native, who earned her medical degree from the University of Arizona, said she "chose to apply to military medical programs against the advice of college advisors."

In military family practice, the Navy "wants one doc who can do everything," said Kulberg. "It's ideal for shipboard duty or isolated locations ... and it's efficient. I appreciate that," she continued.

If that statement about the program's quality wasn't convincing, look at the test scores. The composite score on the latest ABFP In-Training Examination, a national practice exam all family practice residents take on an annual basis, was 520 on a possible 800 score, with the average resident scoring above the national average (500) in all nine subject areas, said Mason.

The third-year residents' average composite score was in the 91st percentile and the highest of the Navy's other three Family Practice Residency programs at Jacksonville, FL; Bremerton, WA; and Camp Pendleton, CA.

According to third-year Chief Resident, LT Timothy Mott: "This environment is highly unique compared with almost every other Family Practice residency, civilian or military."

Both residents praised the command's entire medical team

support for the Family Practice training program. "It's an enthusiastic, interdepartmental support," said Kulberg. "It's amazing," she continued. "We're given access to all of the hospital's medical staff, and they come to our daily morning reports to discuss overnight cases. It's a learning experience I didn't see anywhere else I visited," she said.

The residency program in Pensacola has also added a Navy Water Survival Course to its curriculum. The training is held at the Naval Operational Medical Institute, said Mason, who currently is Chief of the Medical Staff at Naval Hospital Pensacola.

"We get quality people," said Mason, "but it's getting harder to get in the Navy's Family Practice Residency Training programs. Forty-one interns per year are chosen annually out of some 80 applications.

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Conference on Military Medicine
From Uniformed Services University of the Health Sciences

BETHESDA, Md.--The twelfth annual Uniformed Services University of Health Sciences Conference on Military Medicine will occur April 16-18 at the R. Adams Cowley Shock Trauma Center in Baltimore, Md.

Military and civilian trauma surgeons from the United States and abroad will compare and contrast current trauma center surgical methods with those used in austere environments. This course is intended for general surgeons, trauma surgeons, orthopedic surgeons, anesthesiologists, nurse anesthetists, emergency medicine physicians, and critical care physicians. Contact Brenda V. Ellis, (301) 295-6263/9644 or email: Bellis@USUHS.mil for more information.

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Operational Preventive Medicine Course 1998
From Navy Environmental and Preventive Medicine Unit 5

SAN DIEGO--The Operational Preventive Medicine Course will be offered at the Navy Environmental and Preventive Medicine Unit No. 5 (NEPUU5), Naval Station Box 368143, 3035 Albacore Alley, San Diego, CA 92136-5199 June 8-19.

Instruction will identify mission critical public health concerns in operational settings, with an emphasis on planning and practical management of preventive medicine operations from pre-deployment to post-deployment.

Subjects will include epidemiology, international health care issues, field medical entomology, chemical/biological warfare, and industrial hazards of urban warfare, among other topics. An overnight field exercise will also be conducted.

Active duty and reserve Medical Service Corps, Medical Corps, and Nurse Corps Officers and IDC and PMTs E-7 and above from the Navy, Army, Air Force or Public Health Service are eligible to attend. Students for this course, which is limited to 25 students,

must provide a brief statement telling how this course will benefit their current/future billet and command mission. Students are responsible for their own travel and lodging.

Contact NEPMU5 Training Department for more information at DSN: 526-7086, commercial: (619) 556-7086, e-mail: kbchandler@nepmu5.med.navy.mil or visit the NEPMU5 web site and register online at <http://trout.nosc.mil/~nepmu5>

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Hopkins Internet Saturday medicine rounds highlighted in Cybertimes

BETHESDA, Md.--January 26, 1998-- The Johns Hopkins Saturday Medicine Rounds and continuing medical education offerings were prominently featured in yesterday's New York Times' CyberTimes (<http://www.nytimes.com/library/cyber/week/012598medical.html>).

The article, "New Use for Web Aids Doctors' Continuing Education," surveys the availability of continuing medical education programs on the Internet. The Johns Hopkins Saturday Medicine Rounds is the only program cited that incorporates live presentations with photo, slides and audio. The article also indicated that physicians could participate by e-mail.

Launched September 13, 1997, the weekly Internet broadcasts of the Hopkins 9:45 a.m. Saturday Medicine Rounds, remain available for examination indefinitely. According to the article, after the live presentation, the courses are archived where they can be reviewed. Live and archived Hopkins presentations are accessed free of charge at <http://www.hopkinsrounds.edu> or <http://www.audionet.com/edu/jhmr>

Medical boards of 29 states require doctors to take CME courses to maintain licenses. But many physicians, under no obligation to earn CME credits take advantage of the Hopkins program to stay abreast of developments in medicine.

The article cites Dr. John Pierce, an internist in practice in Paducah, Ky.

"I can sit down at any time of day or night and listen to grand rounds that I cannot attend otherwise because they are not occurring in our city."

Dr. Stuart Soares, a University of the West Indies trained oncologist who practices in Kingston, Jamaica, is also mentioned as one who listens to Hopkins rounds. "Taking these courses through the Internet gives me a First World perspective," he says.

For more information contact Potomac Medical Network at 301-320-9064 or the Johns Hopkins office of continuing medical education at 410-955-2959.

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TRICARE question and answer

Question: My spouse has comprehensive health insurance on their job. Do you recommend that he/she enroll in TRICARE Prime?

Answer: First, you and your spouse must carefully compare health services covered under TRICARE Prime with those offered

under your spouse's health insurance program. In some cases, enrollment in TRICARE Prime may not be necessary if your spouse's health insurance program is sufficient to cover his/her health needs. Be sure to check with your local TRICARE Service Center or Health Benefits Advisor before making your final decision to enroll in TRICARE Prime.

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Healthwatch: Magnetic Resonance Imaging and Tattoos

If your doctor is thinking about prescribing a Magnetic Resonance Imaging (MRI) examination and you have tattoos, you may want to question the treatment.

According to Health magazine, some ink used in tattoos contains so much iron oxide that it may pose a hazard to the patient in the MRI machine because magnetic metals can convert the MRI machine's radio frequency pulses into electricity. It is also known that women with permanent eyeliner, which may contain metal, can suffer swelling and pain from MRIs. Consult your doctor for more information.

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Headline: Healthwatch2: Test Your Nutritional Knowledge From Columbia One Source

Eating properly can be puzzling. Everyday we hear new reports about food, snacking, nutrition, and vitamins. Test your nutritional knowledge with a few simple questions. Some questions have more than one correct answer.

1. With fat-free cookies you get:
 - a. lots of calories
 - b. zero fat grams
 - c. less than 1 gram of fat per serving
 - d. to eat twice as many
2. Yogurt is good for you because:
 - a. it's a low-fat food
 - b. it helps reduce lactose intolerance
 - c. it reduces vaginal infections and boosts immunity
 - d. It makes you live longer.
3. Broccoli is a rich source of:
 - a. sulphoraphane
 - b. folate
 - c. vitamin C
 - d. all of the above
4. Rank these juices from most to least by the vitamin C content:
 - a. apple
 - b. grape
 - c. grapefruit
 - d. pineapple
5. Which food, if any, is significantly lower in fat and calories than the others?
 - a. margarine

- b. butter
 - c. mayonnaise
 - d. none of the above
6. Choose the most fiber-rich selection:
- a. whole-wheat bread, cornflakes, green salad
 - b. black beans, bran cereal, strawberries
 - c. tomato, orange celery
 - d. apple, rice, baked potato
7. Which of these foods provide the recommended level of beta carotene?
- a. ½ cup cooked carrots
 - b. ½ cup tomato sauce
 - c. 1 cup cantaloupe and one mango
 - d. all of the above

Answers:

1. a, c - Fat-free means less than one gram of fat per serving. The cookies can still be high in calories-up to 100 calories per cookie- usually from lots of sugar, honey, molasses, juice or corn syrup.
2. b, c - Only skim or non-fat varieties are low-fat. The live cultures in some yogurts help break down lactose, making it easier for the lactose intolerant. In some studies, one to two cups of yogurt a day may help immunity and infections.
3. d - One cup of cooked broccoli supplies 40 percent of the recommended daily allowance (RDA) for the B vitamin folate and twice the requirement for vitamin C. The chemical sulphoraphane, found in cruciferous veggies, may protect against cancer.
4. c, d, a, b - Unless vitamin C is added apple and grape have little. Eight ounces of grapefruit juice gives you your vitamin C RDA and pineapple gives you half.
- 5 d - They are all high in fat and calories, with 11 to 14 grams of fat and 100 120 calories in a tablespoon.
6. b - all these foods contain fiber, but beans, berries and bran are especially fiber-rich.
7. a, c - You should get six to 15 milligram (mg) of beta carotene per day. The carrots provide 11mg and the fruits give you eight mg. The other two have some beta carotene but not a full serving.

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Information correction

The Naval School of Dental Assisting and Technology decommissioning author was misidentified by the contributor in last week's MEDNEWS. The correct author is LCDR James Fitzpatrick, MSC, USN.

The named author should have been identified as LT John A Lamberton. He is the executive assistant to RADM William Snell, chief of Navy Dental Corps.

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Feedback and comments are welcome. Story submissions are

encouraged. Contact MEDNEWS editor, Earl Hicks, at e-mail
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